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Bib Data Sheet

CONFIRMATION NO. 3061

SERIAL NUMBER 09/905,188	FILING OR 371(c) DATE 07/13/2001 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 361331-510
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/218,273 07/13/2000
 and claims benefit of 60/296,435 06/06/2001
 and claims benefit of 60/259,242 01/02/2001
 and claims benefit of 60/259,431 12/29/2000

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED. ** SMALL ENTITY **

** 08/27/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 0	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>CM</i>	Initials <i>CM</i>			

ADDRESS

30623

TITLE

Method for treating fibrotic diseases or other indications IC

FILING FEE RECEIVED 435	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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